

# Exhibit 13

New York State Department of Taxation and Finance

# Resident Income Tax Return

New York State • City of New York • City of Yonkers

For the year Jan. 1 — Dec. 31, 1990, or fiscal tax year beginning , 1990, ending , 19

**1990**

**IT-201**

For office use only

Attach label, or print or type

Last name First name and middle initial (if joint return, enter both names) Your social security number

Naseman, David M and Harding, Toehl

Mailing address (number and street or rural route) Apartment number Spouse's social security number

425 East 51st Street SA-6A

City, village or post office State ZIP code New York State county of residence

New York, New York 10022 New York

In the space below, print or type your permanent home address within New York State if it is not the same as your mailing address above (see instructions, page 20).

Permanent home address (number and street or rural route) Apartment number School district name

Manhattan

City, village or post office State ZIP code If taxpayer is deceased, enter first name and date of death.

NY

(A) Filing status —

① ☐ Single

check one ☒ Married filing joint return (enter spouse's social security number above)

box ☐ Married filing separate return (enter spouse's social security number above)

☐ Head of household (with qualifying person)

☐ Qualifying widow(er) with dependent child

(B) Did you itemize your deductions on your 1990 federal income tax return? ..... Yes ☒ No ☐

(C) Can you be claimed as a dependent on another taxpayer's federal return? .. Yes ☐ No ☒

(D) If you use a paid preparer and do not want New York tax forms mailed to you next year, check box .... ☐

(E) Enter the number of exemptions claimed from your federal return, line 8a ..... **2**

Enter your income items and total adjustments exactly as they appear on your federal return (see instructions, page 10).

1	Wages, salaries, tips, etc.	1	1,252,059.88
2	Taxable interest income	2	54,502.61
3	Dividend income	3	4,236.99
4	Taxable refunds of state and local income taxes (also enter on line 24 below)	4	
5	Alimony received	5	
6	Business income or (loss) (attach copy of federal Schedule C, Form 1040)	6	
7	Capital gain or (loss) (attach copy of federal Schedule D, Form 1040)	7	13,117.37
8	Capital gain distributions not reported on line 7	8	
9	Other gains or (losses) (attach copy of federal Form 4797)	9	
10	Taxable amount of IRA distributions	10	
11	Taxable amount of pensions and annuities	11	
12	Rents, royalties, partnerships, estates, trusts, etc. (attach copy of federal Schedule E, Form 1040)	12	
13	Farm income or (loss) (attach copy of federal Schedule F, Form 1040)	13	
14	Unemployment compensation (insurance)	14	
15	Taxable amount of social security benefits (also enter on line 25 below)	15	
16	Other income (see instructions, page 10) Identify:	16	
17	Add lines 1 through 16	17	1,323,916.85
18	Total federal adjustments to income (see instructions, page 11) Identify:	18	
19	Subtract line 18 from line 17. This is your federal adjusted gross income	19	1,323,916.85
New York Additions: (see instructions, page 11)			
20	Interest income on state and local bonds (but not those of New York State and local governments within the state)	20	
21	Public employee 414(h) retirement contributions (see instructions, page 11)	21	
22	Other (see instructions, page 11) Identify:	22	
23	Add lines 19 through 22	23	1,323,916.85
New York Subtractions: (see instructions, page 12)			
24	Taxable refunds of state and local income taxes (from line 4 above)	24	
25	Taxable amount of social security benefits (from line 15 above)	25	
26	Interest income on US government bonds	26	
27	Pension and annuity income exclusion	27	
28	Other (see instructions, page 12) Identify:	28	
29	Add lines 24 through 28	29	00
30	Subtract line 29 from line 23. This is your New York adjusted gross income (If you claimed the standard deduction on your federal return, skip lines 31 through 45 and enter the line 30 amount on line 46 on the back page.)	30	1,323,916.85

PLAINTIFF'S EXHIBIT

13

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IT-201 (1990) (back)

If you itemized your deductions on federal Form 1040, fill in lines 31 through 45 and continue on line 46.

31 Medical and dental expenses (from federal Schedule A, line 4).....		31		00
32 Taxes you paid (from federal Schedule A, line 8).....		32	145,350	96
33 Interest you paid (from federal Schedule A, line 13).....		33	7,782	75
34 Gifts to charity (from federal Schedule A, line 17).....		34	20,389	15
35 Casualty and theft losses (from federal Schedule A, line 18).....		35		00
36 Moving expenses (from federal Schedule A, line 19).....		36		00
37 Job expenses and most other miscellaneous deductions (from federal Schedule A, line 25).....		37		00
38 Other miscellaneous deductions (from federal Schedule A, line 26).....		38		00
39 Total itemized deductions (from federal Schedule A, line 27).....		39	193,522	86
40 State, local and foreign income taxes included on line 32 (see instructions).....		40	150,804	72
41 Subtract line 40 from line 39.....		41	42,718	14
42 Other adjustments (see instructions, page 14).....		42		00
43 Line 41 and add or subtract line 42.....		43	42,718	14
44 Itemized deduction adjustment (if line 30 is more than \$100,000, see instructions, page 14; all others enter "0" on line 44).....		44	21,359	07
45 Subtract line 44 from line 43. This is your itemized deduction.....		45	21,359	07
46 Enter the amount from line 30 on the front page (this is your New York adjusted gross income).....		46	1,323,916	85
47 Check appropriate box and enter the larger of: OR <input type="checkbox"/> your standard deduction from instructions, page 15, OR <input type="checkbox"/> your itemized deduction from line 45.....		47	21,359	07
48 Subtract line 47 from line 46.....		48	1,302,557	11
49 Dependent exemptions (from line c of Dependent Exemption Worksheet, instructions page 15).....		49	-	00
50 Subtract line 49 from line 48. This is your taxable income.....		50	1,302,557	11
51 New York State tax on line 50 amount (use New York State Tax Table on yellow pages 29 through 36).....		51	136,111	50
52 NY State child and dependent care credit * number of qualifying persons <input type="checkbox"/> credit for 1991 * amount of federal credit for child and dependent care <input type="checkbox"/> x 20% (.20) =		52		
53 New York State household credit (from Table I, II or III, instructions page 16).....		53		
54 Other New York State credits (from Form IT-201-ATT, line 7; attach form).....		54		
55 Add lines 52, 53, and 54.....		55		00
56 Subtract line 55 from line 51 (if line 55 is more than line 51, enter "0").....		56	136,111	50
57 Other New York State taxes (from Form IT-201-ATT, line 15; attach form).....		57		00
58 Add lines 56 and 57. This is the total of your New York State taxes.....		58	136,111	50
59 City of New York resident tax (use City of NY Tax Table on white pages 37 - 44).....		59	67,651	67
60 City of NY household credit (from Table IV, V or VI, page 17).....		60		00
61 Subtract line 60 from line 59 (if line 60 is more than line 59, enter "0").....		61	67,651	67
62 City of New York nonresident earnings tax (attach Form NYC-203).....		62		
63 Other city of New York taxes (from Form IT-201-ATT, line 19; attach form).....		63		
64 City of Yonkers resident income tax surcharge (from Yonkers worksheet, page 18).....		64		
65 City of Yonkers nonresident earnings tax (attach Form Y-203).....		65		
66 Part-year city of Yonkers resident income tax surcharge (attach Form IT-360.1).....		66		
67 Add lines 61 through 66. This is the total of your city of New York and city of Yonkers taxes.....		67	67,651	67
68 If you want to Return a Gift to Wildlife, enter amount: \$5, \$10, \$20, other (see instructions, pages 9 and 10).....		68	10	00
69 Add lines 58, 67 and 68. This is the total of your New York State, city of New York and city of Yonkers taxes, and Gift to Wildlife.....		69	203,443	19
70 Real property tax credit (from Form IT-214, line 17; attach form).....		70		
71 Total New York State tax withheld (attach wage and tax statements to front).....		71	104,401	55
72 Total city of New York tax withheld (attach wage and tax statements to front; see instructions).....		72	44,403	17
73 Total city of Yonkers tax withheld (attach wage and tax statements to front; see instructions).....		73		
74 Estimated tax paid/Amount paid with Form IT-370.....		74		
75 Add lines 70 through 74. This is the total of your payments.....		75	150,804	72
76 If line 75 is more than line 69, enter amount overpaid (also complete line 77 or 78, or both).....		76		
77 Amount of line 76 to be refunded to you.....		77		
78 Amount of line 76 to be applied to your 1991 estimated tax.....		78		
79 If line 75 is less than line 69, enter amount you owe (do not send cash; make check or money order payable to NY State Income Tax; write your social security number and 1990 income tax on it).....		79	52,958	47
80 Estimated tax penalty (see instructions, page 19).....		80		

Mail your completed return to:  
NYS Income Tax  
W. A. Harriman Campus  
Albany, NY 12227-0125

See instructions  
for figuring  
city of New York taxes  
and  
city of Yonkers taxes.

\* Attach Copy 2 of  
your wage and tax  
statements to the front  
of this return; see  
instructions.

\* Sign your return below

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Sign Your Return	Your signature	Date
	Firm's name (or yours, if self-employed)	Preparer's social security number	Employer identification number		Spouse's signature (if joint return)	Date

TH467



Exhibit 14

**Republic National Bank of New York**

DIRECT INQUIRIES TO:  
 452 FIFTH AVENUE  
 NEW YORK, NEW YORK 10018  
 PHONE NUMBER: 212-930-6120

1- E

DAVID M NASEMAN  
 SPECIAL ACCOUNT  
 425 EAST 51ST ST  
 NEW YORK NY 10022

STATEMENT DATE  
 12-30-88  
 PAGE 1

GREAT RATES & FREE RATE GUARANTEE ON FIXED RATE RESIDENTIAL  
 MORTGAGES. CALL MON-FRI 8-6 SAT-SUN 10-1, 212-944-9616 IN  
 NYC 1-800-633-5008 IN NYS EQUAL HOUSING LENDER

SERVICES SUMMARY SERVICE ACCOUNT NO BALANCE

MONEY DIRECTOR 0318188309 404,212.72

MONEY DIRECTOR 0318188309 INSURED MONEY DIRECTOR

SUMMARY PREVIOUS BALANCE AS OF 11-30-88 363,399.71

2 DEPOSITS AND OTHER CREDITS FOR 41,813.01

1 CHECKS AND OTHER DEBITS FOR 1,000.00

CLOSING BALANCE AS OF 12-30-88 404,212.72

DEPOSITS/ CREDITS	DESCRIPTION	DATE	AMOUNT
	DEPOSIT	12-16	39,250.00
	INTEREST PAID	12-30	2,563.01

CHECKS/ DEBITS/ CHARGES	CHECK NUMBER	DATE	AMOUNT	CHECK NUMBER	DATE	AMOUNT	CHECK NUMBER	DATE	AMOUNT
	107	12-21	1,000.00						

DAILY BALANCES	DATE	BALANCE	DATE	BALANCE	DATE	BALANCE
	12-16	402,649.71	12-21	401,649.71	12-30	404,212.72

CUSTOMER INFORMATION THE NUMBER OF DAYS DURING WHICH YOUR ACCOUNT EARNED INTEREST WAS 31  
 YOUR AVERAGE DAILY BALANCE FOR THIS STATEMENT PERIOD \$379,503.00  
 YOUR AVERAGE ANNUAL YIELD FOR THIS STATEMENT PERIOD WAS 07.85%  
 YOUR YEAR-TO-DATE INTEREST PAID IS \$3,941.64

